

DEPARTMENT OF THE ARMY  
HEADQUARTERS, UNITED STATES ARMY MEDICAL DEPARTMENT ACTIVITY  
FORT POLK, LOUISIANA 71459-5110

MEDDAC Regulation  
Number 40-31

1 February 2001

Medical Services  
**LEGAL SPECIMEN COLLECTION, TESTING, AND SOBRIETY EXAMINATION  
FOR ETHYL ALCOHOL AND LIMITED TOXICOLOGICAL PROCEDURES**

1. **PURPOSE.** To provide the principles and policies to be followed in the performance of sobriety examinations and in the collection of specimens for the quantitative and/or qualitative determination of ethyl alcohol and/or other limited drugs for the following purposes:

- a. Suspected illegal use of ethyl alcohol and/or other drugs.
- b. Training accidents involving military vehicles and/or occurring during training maneuvers.
- c. Autopsies.
- d. Aircraft accidents.

2. **SCOPE.** This regulation is applicable to all personnel involved directly or indirectly with collecting, transporting, and/or testing of specimens for legal sobriety examinations involving ethyl alcohol and other limited toxicology procedures.

3. **REFERENCES.** References are listed in appendix A.

4. **TERMS.**

a. **INFORMED CONSENT.**

(1) To be effective in law, this consent must be informed. That means that the person called upon to give consent must have enough knowledge about the procedure in question, its purpose, risks, and probable consequences to enable them to make a reasonable judgement about granting or denying consent.

(2) The subject should be given as much essential information as possible in an honest effort to help them to make a reasonable judgement. This is true even if the subject is known to be reluctant to consent for some reason which lacks any medical justification.

b. **FREEDOM OF CONSENT.** To be legally effective, consent must be free as well as informed. Free consent means that which is given on the basis of independent judgement, free from any coercion or undue influence.

c. **Physician Extender.** A physician assistant or nurse practitioner.

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\*This regulation supersedes MEDDAC Reg 40-31 dated 27 January 2000

## 5. EXPLANATIONS.

a. For legal purposes, all personnel (including the attending medical officer and other MEDDAC personnel) involved in the administration, handling, and performance of chemical tests must keep in mind that extreme care is demanded in following the procedures outlined herein. Such personnel may be called upon to testify for an investigating officer or court martial; therefore, the procedures used and circumstances surrounding the determination (including the chain of custody and safeguarding of legal specimens) must be accurately reflected on MEDDAC Form 1323, APPENDIX C (Toxicological Exam - Request and Report). Moreover, all precautions in the protection of the individual's legal rights must be strictly observed.

### b. EXCLUSIONS TO POLICY.

(1) The installation Alcohol/Drug Control Officer (ADCO) conducts testing in support of the Department of the Army's Command-Directed urinalysis program. This program includes strict chain-of-custody procedures. If these specimens are brought to the Bayne-Jones Army Community Hospital Laboratory, the requesting individual will be referred back to the Unit Alcohol/Drug Coordinator (UADC).

(2) The Alcohol and Drug Abuse Prevention and Control Program (ADAPCP) is also involved in Immediate Fitness for Duty Examinations for Fort Polk civilian employees where there is behavior that impairs work accomplishment, morale, safety, or threatens security.

## 6. RESPONSIBILITY FOR SOBRIETY EXAMINATION

a. In the Emergency Room, the physician or physician extender who first examines the patient will be responsible for the verification of the identity of the individual under examination, for the medical examination, for obtaining the specimens for alcohol or drug determination, and for the proper execution of the required forms.

b. Laboratory personnel designated by the Chief, Department of Pathology, will accept the specimens and required forms to verify compliance with collection procedures and proper maintenance of the MEDDAC Form 1323 and MEDDAC Form 198, APPENDIX B (Consent for Toxicological Examination). Laboratory personnel will also be responsible for the proper security, storage and testing of the legal specimens.

## 7. PROCEDURES.

a. **CONSENT REQUIRED.** Legal specimens will be ordered only by the examining physician or physician extender who will first ensure that either the consent of the examinee has been obtained (MEDDAC Form 198 or that the specimen is being drawn in accordance with Army Policy and Regulations as outlined in paragraph 7b (Consent not required). The consent statement in MEDDAC Form 198, will be administered by the physician, physician extender, registered nurse or qualified technician that obtains the specimens and will be signed by two (2) witnesses.

(1) **WHEN THE INDIVIDUAL DOES NOT CONSENT, A STATEMENT WILL BE ENTERED ON THE SF 558, Medical Record Emergency Care and Treatment (Patient),** by the physician or physician extender that Article 31 has been read and explained to the examinee, and that the consent to obtain legal specimens for drug and/or alcohol determination was not granted.

(2) Toxicological/alcohol specimens will not be obtained in these cases. Other legal channels should be pursued if deemed necessary.

b. **CONSENT NOT REQUIRED.** Consent to obtain specimens for drug/alcohol determination is not required in the following situations:

(1) Consent is not required if the subject is deceased, unconscious, or otherwise unable to withdraw his implied consent and the installation law enforcement officers have reasonable grounds to believe the

subject was driving or in actual physical control of a motor vehicle while under the influence of alcohol/drugs.

(2) When the drug or alcohol determination must be known for strictly medical reasons as information required by the care provider to assist in the determination and an appropriate care regime, e.g., to differentiate between diabetic coma, intracranial injury or disease, to prevent undue suffering, or any other purely medical emergency, to save "life or limb." No paperwork will be submitted with these samples, the CHCS order is sufficient.

(3) When there is clear indication that evidence of a crime will be found, and there is reason to believe that a delay to obtain command authorization could result in the loss of evidence. These two determinations rest solely with law enforcement personnel or a military judge or magistrate.

(4) When authorized by the soldier's commanding officer, a military magistrate, or the military judge, IAW Military Rule of Evidence 315, as part of an investigation into potential criminal misconduct. This authorization to search (collect the specimen) may be verbal, and authorizes law enforcement officers in the execution of their duties to request qualified medical personnel to take a blood sample or to request a urine sample to be collected from the accused. If the officer authorizing such a search (collection of specimen) is not present in the medical facility, the unit representatives must have this authorization in writing or be able to provide medical personnel with a telephone number at which the authorizing officer may be contacted.

(5) If a civilian apprehended on the installation for an offense allegedly committed while driving under the influence of alcohol refuses consent to a blood test; such a test may still be administered; under the authority of a search authorization ordered by a military judge, military magistrate, or U.S. Magistrate. The Office of the Staff Judge Advocate will coordinate to obtain such a search warrant in appropriate cases.

c. **DRAWING SPECIMENS.** Blood samples drawn for purposes of legal blood alcohol determinations may be drawn by a physician, physician assistant, registered nurse, or qualified technician in the Emergency Room.

**(1) FOR LEGAL BLOOD ALCOHOLS:**

(a) Specimens drawn for legal investigations must be drawn using blood test kits approved by the State of Louisiana Department of Public Safety for use in DWI prosecutions. These kits are available through the Louisiana Department of Public Safety, Office of State Police, Crime Laboratory, P.O. Box 6614, Baton Rouge, Louisiana 70896. **NOTICE: IT IS THE RESPONSIBILITY OF THE EMERGENCY ROOM TO OBTAIN THESE KITS AND HAVE A SUFFICIENT SUPPLY AVAILABLE AT ALL TIMES.**

**LEGAL BLOOD ALCOHOL SPECIMENS WILL BE REJECTED IF NOT SUBMITTED IN THE STATE APPROVED KITS.**

(b) Specimens drawn for DWI investigations must be collected and sealed in accordance with the following instructions:

1. Perform a venipuncture on the patient following your Departmental / Clinic procedure for phlebotomy with the following precautions:

a. Use only the non-alcoholic antiseptic pad provided in the kit.

b. During this procedure, do not allow contents of vacutainer to contact the stopper. Special attention should be given to arm position and tube position in order to prevent possible backflow from the tube, which may cause an adverse reaction to the patient.

- c. To assure proper mixing with anticoagulant powder (Sodium Fluoride/Potassium Oxalate 10 mg/mL), slowly invert the tubes at least five times immediately after blood collection. Do not shake vigorously!
- d. DO NOT collect a urine specimen as instructed in the kit.
- e. DO NOT fill in Police Officer's Report that is in the kit.
- f. DO NOT fill in Blood Collection Report or Consent Form in the kit. The MEDDAC Form 1323 is used for this purpose.
- g. Write the patient's name and full social security number on the side of each tube.
- h. Place a seal over the top of each of the tubes with one of the red integrity seals provided in the kit. The person that sealed the tube will sign and date the Integrity Seal.
- i. Place the sealed specimens in the Louisiana State approved blood alcohol box provided. Place the white absorbent pad on top of the blood vials. Snap the plastic box lid back onto the box, tightly closing it.
- j. Fill in two of the white seals with the name of the subject, the specimen collector's initials, the date and time. Affix one of the white seals to each end of the closed plastic box, sealing both ends.
- k. Place the plastic box in the plastic zip-lock bag provided and place in the cardboard mailer box. The outer cardboard box does not have to be sealed, as the contents of the box will be checked by laboratory personnel.
- l. The completed paperwork and blood specimen will be immediately delivered to the laboratory personnel for storage until testing has been completed.
- m. The laboratory personnel will secure the specimen and paperwork in the proper lock box.

**LEGAL BLOOD ALCOHOLS WILL BE REJECTED IF THE LABEL WITH THE PATIENT'S NAME IS NOT ON THE SIDE OF EACH CONTAINER OF BLOOD AND IF THE TOP OF EACH TUBE IS NOT SEALED.**

**(2) FOR TRAINING ACCIDENTS AND AIRCRAFT ACCIDENTS**

- (a) Clean site of venipuncture with a non-alcoholic antiseptic (e.g. providine or hexachlorophene).
- (b) Draw two (2) large (15ml) red-top tubes (containing no preservatives), two (2) lavender (EDTA) tubes and two (2) gray (NaF) tubes.
  - 1. Do not shake or mix the red-top tubes.
  - 2. Mix the two lavender tubes by gentle inversion for about 30 seconds.
  - 3. Mix the two gray-top tubes by gentle inversion for about 60 seconds.
- (c) Collect seventy (70) ml of urine in screw-capped urine container.
- (d) Seal and label all tubes and urine specimens as described below.

**(3) FOR AUTOPSIES. AFIP PROTOCOL IS USED ON AUTOPSY SPECIMENS FOR TOXICOLOGICAL EXAMINATION.**

Complete instructions and request forms are available from the Department of Pathology.

**d. COMPLETION OF LEGAL PAPERWORK (Legal Blood Alcohol)**

(1) MEDDAC Form 198 (Statement of Consent for Toxicological Examination) is used for Legal Blood Alcohols Only:

**\*ONE COPY\***

**COMPLETE THE FOLLOWING INFORMATION**

- (a) Signature and date of examinee.
- (b) Printed name (last, first, and middle initial), Rank, and SSN of examinee.
- (c) Consent statement will be witnessed and signed by two witnesses.

**(d) IF CONSENT HAS NOT BEEN OBTAINED, THE FOLLOWING INFORMATION MUST BE GIVEN:**

- 1. A **LEGAL** reason to force the examinee to submit to a legal blood alcohol as outlined in section 7b of this regulation.
- 2. The signature, rank and/or position, and date of statement of person with the **legal authority to make such a determination**.

**LEGAL BLOOD ALCOHOL SPECIMENS WILL BE REJECTED WHERE THERE IS NEITHER A SIGNED STATEMENT OF CONSENT BY THE EXAMINEE OR A SIGNED AUTHORITY FOR LEGAL BLOOD ALCOHOL EXAMINATION WHEN CONSENT IS NOT OBTAINED.**

- (e) Print the name and telephone number of the person requesting the blood alcohol for the Patient Administration Division.
- (f) The requesting physician or physician extender will forward the Consent Form to the Laboratory with the examinee's blood specimens.

**(2) MEDDAC FORM 1323 (TOXICOLOGICAL EXAMINATION-REQUEST AND REPORT) FOR LEGAL BLOOD ALCOHOLS.**

Complete the following information:

**NOTE: BE SURE TO MAINTAIN A COMPLETE ORIGINAL THROUGHOUT COMPLETION OF PAPERWORK. THE SPECIMEN WILL BE REJECTED IF MEDDAC FORM 1323 IS NOT ORIGINAL.**

- (a) Item 1: Print name of patient.
- (b) Item 2: Give complete social security number.
- (c) Item 3: Age of Patient.
- (d) Item 4: Patient's Sex.
- (e) Item 5: Enter Patient's Race.

- (f) Item 6: Name of Phlebotomist
- (g) Item 7: Signature of Phlebotomist
- (h) Item 8: Location of Venipuncture Site.
- (i) Item 9: Patient's Signature of Consent.

(For Legal Blood Alcohol, the donor may sign the consent to collection, along with one witness) \*If the donor does not consent to testing, the MEDDAC Form 198 must be completed.

- (j) Item 10: Witness's Signature.
- (k) Item 11: Date of Request.

(l) Item 12: Print the name and title of the requester. **(THE REQUESTER CAN ONLY BE A PHYSICIAN OR A PHYSICIAN EXTENDER)\*\*\* SEE ITEM 25.**

- (m) Item 13: The signature of the physician or physician extender.

**NOTICE: ANY OTHER SIGNATURE IN THIS SPACE (SUCH AS A COMMANDER'S SIGNATURE, AND MP'S SIGNATURE, OR A NURSE'S SIGNATURE) WILL CAUSE THE SPECIMEN TO BE REJECTED. ONLY A PHYSICIAN, PHYSICIAN ASSISTANT, OR NURSE PRACTITIONER MAY REQUEST LEGAL BLOOD ALCOHOLS.** In such cases, the paperwork will be returned to the individual who has legal control of the specimen.

(n) Items 13-17: The Chain of Custody must be completed by every person who handles the legal specimen from the time it is drawn until it has been tested.

- 1 Signature
- 2 Organization
- 3 Hour in handler's possession
- 4 Date in handler's possession
- 5 Condition of the specimen while in possession of the handler (example: sealed)

(o) The original copy of MEDDAC Form 1323 will be submitted to the laboratory to be checked for errors and for maintenance of the Chain of Custody.

**BLOOD ALCOHOL SPECIMENS WILL BE REJECTED IF MEDDAC FORM 1323 DOES NOT CONTAIN THE NAME OF THE PATIENT, SSN, THE SPECIMEN TYPE (WITH AMOUNT AND TYPE OF PRESERVATIVE), THE NAME AND SIGNATURE OF THE PHYSICIAN OR PHYSICIAN EXTENDER, AND COMPLETED CHAIN OF CUSTODY.**

- 1 After checking and signing the Chain of Custody, the specimens being submitted will be secured in the proper lock-box (or locked refrigerator) along with the paperwork which will be placed in the container.
- 2 After the results are obtained from testing, the completed original copy of the MEDDAC Form 1323 and the MEDDAC Form 198 will be forwarded to the Legal clerk in Patient

Administration Division. The clerk will initial and date his/her acceptance of the paperwork in the laboratory's log book.

(3) Routine CHCS orders are **FOR MEDICAL BLOOD ALCOHOLS OR ROUTINE TOXICOLOGY EXAMINATIONS ONLY.**

- (a) All medical blood alcohols reported in CHCS will include the following statement:

**NOT FOR LEGAL PURPOSES:**

- (b) All specimens reported in CHCS will be handled as any routine specimen in the laboratory.
- (4) Legal Blood Alcohol testing will be ordered in CHCS by Laboratory Personnel. All results will be considered as SENSITIVE test and limited to physicians and authorized Laboratory Personnel.

**e. COMPLETION OF LEGAL PAPERWORK (TRAINING ACCIDENTS AND AIRCRAFT ACCIDENTS)**

**AFIP FORM 1323, APPENDIX D (TOXICOLOGICAL REQUEST FORM)**

Complete the following information:

**NOTE: BE SURE TO MAINTAIN A COMPLETE ORIGINAL THROUGHOUT COMPLETION OF PAPERWORK. THE SPECIMEN WILL BE REJECTED IF AFIP FORM 1323 IS NOT AN ORIGINAL.**

- (1) Print name of patient.
- (2) Give complete social security number.
- (3) Age of Patient.
- (4) Patient's Sex.
- (5) Enter Patient's Race.
- (6) Date of incident / accident
- (7) Date and Time of Death / Autopsy # if indicated.
- (8) Medication History.
- (9) List of specimens and amounts: As stated above this should contain, 2 large red top blood tubes, lavender top tubes, 2 gray top tubes and a minimum of 70 mls of urine.
- (10) Details of incident / accident
- (12) Print the name and title of the requester. **(THE REQUESTER CAN ONLY BE A PHYSICIAN OR A PHYSICIAN EXTENDER).**
- (13) The signature of the physician or physician extender.

**NOTICE: ANY OTHER SIGNATURE IN THIS SPACE (SUCH AS A COMMANDER'S SIGNATURE, AND MP'S SIGNATURE, OR A NURSE'S SIGNATURE) WILL CAUSE THE SPECIMEN TO BE REJECTED. ONLY A PHYSICIAN, PHYSICIAN ASSISTANT, OR**

**NURSE PRACTITIONER MAY REQUEST LEGAL BLOOD ALCOHOLS.** In such cases, the paperwork will be returned to the individual who has legal control of the specimen.

(14) Date signed.

(15) Phone information for the physician or physician extender

(16) The Chain of Custody must be completed by every person who handles the legal specimen from the time it is drawn until it has been tested.

(a) Signature

(b) Hour in handler's possession

(c) Date in handler's possession

(d) Purpose of transfer

**f. SPECIMEN HANDLING AND DELIVERY**

(1) Legal specimens will be transported from the location of the physical examination, by the most expedient means, to the laboratory. Individuals having responsibility for the specimens will complete the Chain of Custody as possession is transferred from person to person. If delay in delivery is experienced, specimens should be secured to the maximum extent possible. Specimens will be secured in an appropriate designated lock-box or refrigerator in the Department of Pathology in accordance with the current physical security policy.

(2) Personnel designated by the Chief, Department of Pathology will properly pack and ship the legal specimens to the proper testing lab(s). All legal specimens for shipment will be sent in such a way as to maintain the legality of the Chain of Custody and security of the specimens.

**g. RELEASE OF RESULTS.** The results of legal specimens will be released only through the Patient Administration Division. No telephonic release of information is authorized. Absolutely no legal blood alcohol or legal toxicology report will be given out over the telephone to anyone.

**ONLY THE PATIENT ADMINISTRATION DIVISION CAN RELEASE BLOOD ALCOHOL OR TOXICOLOGY RESULTS.**

**h. UNUSUAL OCCURANCES**

(1) Reports of unusual occurrences should be submitted on DA Form 4106 to Risk Management. Submission of these forms with detailed information about problems are encouraged so we can identify and resolve any problems as they occur.

(2) Problems may arise from time to time when dealing with legal specimens. The Department of Pathology will assist with any problems. Please contact the NCOIC or Laboratory Manager when necessary.



## APPENDIX A

### REFERENCES

AR 600-85, Alcohol and Drug Abuse Prevention and Control Program dated 26 March 1999.

AR 190-5, Motor Vehicle Traffic Supervision dated 8 July 1988.

Military Rule of Evidence 315, Manual for Court-Martials dated 1998.

AR 600-20, Army Command Policy dated 15 July 1999.

Military Rule of Evidence 312: Bodily Views and Intrusions, Manual for Court-Martials dated 1998.

AR 40-66, Release of Medical Information dated 03 May 1999.

JRTC & FP Reg 690-22, Employee Alcohol and Drug Abuse Prevention and control dated 12 March 1993.

MEDDAC Reg 40-82, Informed Consent for Medical Treatment for Medical or Surgical Procedures dated February 2001.

## APPENDIX B

## STATEMENT OF CONSENT FOR LEGAL BLOOD ALCOHOL EXAMINATION

I have granted permission for blood samples to be taken for legal blood alcohol determination. This consent is made freely and voluntarily and without compulsion or coercion on the part of any individual. I have been informed of the procedures in question, its purpose, its risks, and its probable consequences.

SIGNATURE OF EXAMINEE: \_\_\_\_\_ DATE: \_\_\_\_\_

NAME: LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MI \_\_\_\_\_ RANK \_\_\_\_\_ SSN \_\_\_\_\_

WITNESS SIGNATURE: \_\_\_\_\_

WITNESS SIGNATURE: \_\_\_\_\_

\*\*\*\*\*

## AUTHORITY FOR LEGAL BLOOD ALCOHOL EXAMINATION WHEN CONSENT IS NOT GIVEN

The EXAMINEE HAS NOT GRANTED CONSENT for blood to be drawn for a legal blood alcohol. However, I have determined that the examination is essential for the following reason(s) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Therefore, I have ordered that a blood specimen be drawn and submitted for alcohol content.

SIGNATURE OF LEGAL AUTHORITY \_\_\_\_\_ RANK AND/OR POSITION \_\_\_\_\_ DATE \_\_\_\_\_

\*\*\*\*\*

ATTN: PAD

LEGAL BA

NAME OF PERSON REQUESTING BA: \_\_\_\_\_

PHONE: \_\_\_\_\_

## APPENDIX C

<b>TOXICOLOGICAL EXAM - REQUEST AND REPORT</b> BAYNE-JONES ARMY COMMUNITY HOSPITAL FORT POLK, LA 71459-5110			<b>REQUESTING LOCATION:</b> Emergency Medical Services Bayne-Jones Army Community Hospital Fort Polk, LA 71459		
<b>SECTION A - PATIENT INFORMATION</b>					
1. NAME OF PATIENT: (L, F, M)				2. SSAN	
3. AGE	4. SEX	5. RACE	ALL INFORMATION MUST BE VERIFIED USING A PICTURE IDENTIFICATION OR CHAIN OF COMMAND		
SPECIMEN COLLECTION INFORMATION				HOUR AND DATE	
SPECIMEN		AMOUNT		PRESERVATIVE	
VENOUS BLOOD		10cc		Sodoum Flouride / Potasium Oxalate	
VENOUS BLOOD		10cc		Sodoum Flouride / Potasium Oxalate	
6. Phlebobotomist					
7. Signature					
8. Location of Venipuncture Site					
<b>Section B - Patient Consent / Witness / Request</b>					
9. I Consent to the above testing: (Patient)					
10. Witness: (Emergency Room Staff)					
11. Date	12. Name and Title of Requestor			13. Signature	
<b>Section C - Chain of Custody</b>					
Signature	Organization	Hour	Date	Specimen Condition	
14	MEDDAC				
15	MEDDAC				
16	MEDDAC				
17	MEDDAC				
18	MEDDAC				
<b>Section D - Results</b>					
LABORATORY		Bayne-Jones Army Community Hospital Department of Pathology Fort Polk, LA 71459		Date	Case Number
<b>RESULTS:</b> _____ g/dl Ethanol					
REMARKS:					
Analyzed on the Johnson and Johnson Vitros 250 Analyzer. All testing performed in accordance with NCCLS Guide T/DM6-A, Dated September 1997.					
Date	Toxicologist:			Signature	

**AFIP/ DIVISION OF FORENSIC TOXICOLOGY - TOXICOLOGICAL REQUEST FORM****TO:**

ARMED FORCES INSTITUTE OF PATHOLOGY  
ATTN: DIVISION OF FORENSIC TOXICOLOGY  
BUILDING 54  
6825 16TH STREET, N.W.  
WASHINGTON, DC 20306-6000

**FORWARD FINAL REPORT TO:**

Department of Pathology  
Bayne-Jones Army Community Hospital  
1585 3rd Street  
Fort Polk, LA 71459-5110

NAME OF PATIENT ( <i>Last, First, MI</i> )	SOCIAL SECURITY #	AGE	SEX	RACE

DATE OF INCIDENT/ ACCIDENT	TIME AND DATE OF DEATH	AUTOPSY #

MEDICATION HISTORY ( <i>Prescribed or administered, in patient's possession, containers found near body, etc.</i> )

SPECIMEN/ AMOUNT	SPECIMEN/ AMOUNT	SPECIMEN/ AMOUNT
1.	5.	9.
2.	6.	10.
3.	7.	11.
4.	8.	12.

INCIDENT/ ACCIDENT DETAILS ( <i>Include pertinent information regarding crash site, autopsy or investigation; (e.g., What happened?)</i> )

PRINTED NAME OF REQUESTER/ TITLE	SIGNATURE	DATE	TELEPHONE #:
			COMM: DSN: FAX:

***CHAIN OF CUSTODY (CC)***

*Each individual charged with custody of specimens must complete information below (continue CC on reverse as required).*

RELEASED BY	RECEIVED BY	DATE & TIME	PURPOSE OF TRANSFER
SIGNATURE	SIGNATURE		
PRINTED NAME	PRINTED NAME		
SIGNATURE	SIGNATURE		
PRINTED NAME	PRINTED NAME		
SIGNATURE	SIGNATURE		
PRINTED NAME	PRINTED NAME		
SIGNATURE	SIGNATURE		
PRINTED NAME	PRINTED NAME		
SIGNATURE	SIGNATURE		
PRINTED NAME	PRINTED NAME		

**AFIP FORM 1323, FEB 99 PREVIOUS EDITIONS OBSOLETE.**

## APPENDIX E

**BLOOD ALCOHOLS**

	<b>SPECIMEN</b>	<b>MEDDAC FORM 198 (Consent)</b>	<b>MEDDAC FORM 1323 (Chain of custody)</b>	<b>ORDER IN CHCS</b>
MEDICAL BLOOD ALCOHOLS	1 SMALL RED TOP TUBE			<b>X</b>
LEGAL BLOOD ALCOHOLS	<b>(STATE APPROVED ETOH KIT ONLY)</b> 2 GRAY TOP TUBES A. SEAL TOP B. LABEL TUBES C. MEDDAC Form 1323 SIGNED BY PHYSICIAN OR PHYSICIAN EXTENDER. D. EVERY PERSON HANDLING THE SPECIMEN MUST SIGN THE CHAIN OF CUSTODY	<b>X</b>	<b>X</b>	

**DRUG SCREEN**

	<b>SPECIMEN</b>	<b>AFIP FORM 1323, APPENDIX D (Chain of Custody)</b>	<b>ORDER IN CHCS</b>
MEDICAL DRUG SCREEN	50 CC RANDOM URINE		<b>X</b>
DRUG SCREEN FOR TRAINING ACCIDENTS	2 LARGE RED TOP TUBES 2 LAVENDER TOP TUBES (EDTA) 2 GRAY TOP TUBES (NaFl) 70 CC URINE A. CHAIN OF CUSTODY MUST BE KEPT B. CONSENT NOT NECESSARY	<b>X</b>	

**NOTE: LEGAL DRUG SCREENS ARE NOT HANDLED BY THE DEPARTMENT OF  
PATHOLOGY. (NOTIFY ADAPCP FOR ALL LEGAL DRUG SCREEN PROCEDURES)**

The proponent agency of this regulation is the Department of Pathology. Users are invited to send comments and /or suggestions to the Commander, USAMEDDAC, ATTN: MCXV-DP, Fort Polk Louisiana 71459-5110

FOR THE COMMANDER:

MARK J. PERRY  
LTC, MS  
Deputy Commander for  
Administration